## Best Available Copy

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09/509055

| CLAIMS AS FILED - PART I   |  |   |                         |   |                          | SMALL<br>TYPE       | ENTITY                 |    | OTHER               |                        |
|--|--|---|-------------------------|---|--------------------------|---------------------|------------------------|----|---------------------|------------------------|
| FOD :  |  | <del></del>                               | (Column 1) NUMBER FILED |   | (Column 2)  NUMBER EXTRA |                     |                        | OR |                     |                        |
| FOR  |  | NOWBI                                     | H FILED                 | NUMBER                                      | EXTHA                    | RATE                | FEE                    |    | RATE                | FEE                    |
| BASIC FEE  |  |   |                         |   |                          |                     | 380.00                 | OR |                     | <del>760.0</del> 0     |
| TOTAL CLAIMS   |  |   | minus 2                 | 20= *                                       |                          | X\$ 9=              |                        | OR | X\$18=              | (                      |
| IND  | EPENDENT CL                                    | AIMS                                      | minus                   | 3 = *                                       |                          | X39=                |                        | OR | X78=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                         |   |                          | +130=               |                        | OR | +260=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                         |   |                          | TOTAL               |                        | OR | TOTAL               | 840                    |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |                         |   |                          |                     | ENTITY                 | OR | OTHER<br>SMALL I    | THAN                   |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | * <i>[0</i>                               | Minus                   | ** 20                                       | =                        | X\$ 9=              |                        | OR | X\$18=              | ١                      |
|  | Independent                                    | * 2                                       | Minus                   | *** 3                                       | =                        | X39=                |                        | OR | X78=                |                        |
|  | FIRST PRESE                                    | NIATION OF M                              | ULTIPLE DEF             | PENDENT CLAIM                               |                          | +130=               |                        | OR | +260=               |                        |
|  |  |   |                         |   |                          | TOTAL               |                        | OR | TOTA                | SUN A                  |
|  |  | ADDIT. FEE                                |                         | On  | ADDIT. FEÈ               | 840.00              |                        |    |                     |                        |
|  |  | (Column 3)                                |                         |   |                          |                     |                        |    |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | · 8                                       | Minus                   | 9   | 1                        | X\$ 9=              |                        | OR | X\$18=              |                        |
|  | Independent                                    | * 3                                       | Minus                   | *** 3                                       | =                        | X39=                |                        | OR | X78=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                         |   |                          |                     |                        | On |                     |                        |
|  |  |   |                         |   |                          | +130=               |                        | OR | +260=               |                        |
|  |  |   |                         |   |                          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                         | (Column 2)                                  | (Column 3)               |                     |                        |    |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                   | **  | =                        | X\$ 9=              |                        | OR | X\$18=              |                        |
|  | Independent                                    | *   | Minus                   | ***   | =                        | X39=                |                        | OR | X78=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                         |   |                          |                     |                        | UH |                     |                        |
|  | f the entry in colu                            | +130=                                     |                         | OR  | +260=                    |                     |                        |    |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                         |   |                          |                     |                        |    |                     |                        |